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Nova Southeastern University

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# MEDICAL EDUCATION DIGEST

*"Medical Education Highlights for Primary Health Care"*

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## Defining Educational Objectives in Medical Schools



Objectives provide a statement indicating the outcomes required to achieve educational goals and provide a template for curriculum design, implementation, and evaluation. This is emphasized in a report by the chair of a University of Virginia Medical School Task Force, Eugene C. Corbett, Jr., M.D. His task force developed 12 fundamental objectives that medical students should acquire which are summarized below:



- 1.) A set of personal and professional attributes for independent performance and adaptation to the evolving practice of medicine.
- 2.) Understanding clinically relevant medical science and scientific principles needed to expand medical knowledge.
- 3.) Engage patients in a relationship to solve and care for clinical problems.
- 4.) Elicit a clinical history.
- 5.) Perform a physical examination.
- 6.) Generate a prioritized differential diagnosis.
- 7.) Develop and refine a plan of care for prevention and treatment.
- 8.) Develop a prognosis for individuals, families, populations and a plan for follow-up.
- 9.) Select and interpret clinical tests.
- 10.) Organize, present, research, critique, and manage clinical information.
- 11.) Select and perform diagnostic and therapeutic procedures.
- 12.) Know the context in which medicine is practiced (i.e., social, economic, historical, ethical, legal, historical).



# Measuring Faculty Effort and Contributions in Medical Education

The first report of a panel from the Mission-based Management Program of the Association of American Medical Colleges presents a metrics system approach to measure medical school faculty effort in education. The panel recommends a relative value scale (RVU) to distinguish among the various ways that the individual faculty member contributes to a school's mission.

Specific faculty education activities that are assessed include **outpatient preceptor, education committee service, teaching with clinical procedures, inpatient attending or consult rounds, clinical conference or morning report, individual tutor or advisor, small-group instructor, lecture, course director, grand rounds.** To assign a value or weight to each activity, the following are considered:

- ◆ Time required to conduct the activity.
- ◆ Time and effort required to prepare the activity.
- ◆ Level of faculty skill or experience for an activity.
- ◆ Relative value to the educational mission.

A method of weighing and calculating the RVU's is provided.

(Nutter D.O., et al. Measuring Faculty Effort and Contributions in Medical Education. *Academic Medicine*. 75:199-207, 2000.)



## What Residents Want to Know about Geriatrics: An Approach to Curriculum Development

Resident physicians emphasize that they require additional training in communication skills as well as a broadening in the scope of settings where geriatric education takes place.

Residents noted that hospital settings compared to ambulatory care experiences were often a barrier to building relationships.

In a study of three focus groups, while residents were generally positive about their

relationships with older patients, there were exceptions in the case of end-of-life discussions and in relating to demented patients.

They placed strong emphasis on effective role models as an essential part of their education.

It is interesting to note that residents made only brief mention of wanting education about nutritional issues, functional assessment, and other health maintenance activities.

(Chodosh J., et al. What Residents Want to Know about Geriatrics: An Approach to Curriculum Development. *Gerontology and Geriatrics Education*. 20 (2) 19-35, 1999.)





# Communication and Educational Change

The importance of communication in the process of educational change is demonstrated by looking at six schools of medicine. It is a decisive element of any successful reform initiative. Lessons learned about the role of communication are:



It is essential for developing and implementing innovation.



Communication skills used by successful leaders stimulate others to be innovative.



It creates a sense of ownership among all participants.



Communication reduces resistance to change.



Face-to-face communication is optimal.



Planned redundancy is essential.



Frequent and regular meetings with all constituents creates collegiality.



Ad hoc groups support communication.



Central educational offices can facilitate communication.



Electronic mail enhances communication.



# Training Minorities for Biomedical Careers



**P**oor

Americans of all racial and ethnic groups and disadvantaged minorities have higher rates of cancer incidence and morbidity than people from other socio-economic groups.

While a smaller percentage of African American women are diagnosed with breast cancer, they are more likely to die from the disease than women from other ethnic groups. Vietnamese American women have the highest rate of cervical cancer than of any ethnic group.

The National Institute of

General Medical Sciences Minority Access to Research Careers (MARC) Program focuses on bringing minority undergraduate students into medicine. However, a faculty member from a historically black college indicates that other minority programs have not shown much success or there would not have been more programs introduced.

It is pointed out that funding college and university research at colleges and universities that serve historically underserved populations is not enough. It is important to interest young children in science while

they are quite young.

The goal is to provide incentives very early in the "pipeline" to consider research as a career. The NIH Undergraduate Scholarship Program provides opportunities to students who would not have research opportunities.

Since 1996 it has funded 55 college students and approximately 30 program graduates have been split 50-50 between M.D./Ph.D. and Ph.D. programs.

(Wantanabe ME. Strategic Alliances – NIH Puts Serious Muscle into Training Minorities for Biomedical Careers. *The Scientist*. 14: (March 20) 1,10-11, 2000.)



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